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| **Application Deadline: 15.06.2017**  **HIDDEN MEMORIES**  Introduction SeminarKyiv, 14-16.07.2017  Story-Telling SeminarKyiv, Sep/Oct, 2017  Opening Ceremony Kyiv, Nov/Dec, 2017  Exact dates will be communicated shortly. |

Please send the completely filled-in application to [hiddenmemories2017@gmail.com](mailto:hiddenmemories2017@gmail.com)

For questions where you should choose one or several answers, please mark your answer(s) with an **„x“** in the small box aside.

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| **Surname:** |  | | | | | | | |
| **Name:** |  | | | | | | | |
| **Age:** |  | |  | | |  |
| **Email:** |  | | | | | | | |
| **Telephone:** |  | | | | | | | |
| **Organisation:** |  | | | | | | | |
| **Current Address:** |  | | | | | | | |
| **Hometown/region** |  | | | | | | | |
|  |  | | | | | | | |
| **Level of English:** | **Fluent** | **Advanced** | | **Intermediate** | **Basics** | | | **Beginner** |
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| **1** | **How did you find out about the Workshop** |
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|  | Iskra’s page |
|  | CRISP Homepage |
|  | Colleagues/Work |
|  | Friends |
|  | University |
|  |  |
|  |  |
| **2** | **Are you involved in any students’, social, political, history-related, environmental activities?** |
|  | |
|  | Yes |
|  | No |
| If yes, in which ones? Please specify… | |

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| **3** | **Do you have any experience conducting interviews?** | |
|  | | |
|  | Yes | |
|  | No | |
| If yes, what kind? Please specify… | | |
| **4** | | **What technical or creative skills do you have that might be helpful in creating a mobile app/audio-installation/digital stories archive?** |
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| **5** | **Please explain very briefly: Why did the Maidan Revolution 2013/14 happen? What do you think were the main values and goals of the Maidan supporters? And of the people opposed to the Maidan?** |
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| **6** | **What is your main motivation for participating in this workshop?** |
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| **7** | **Are you applying for travel reimbursement?** |
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| Please name the route, means of transport, amount of travel costs. | |

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| **8** | **Do you have any food allergies or restrictions?** |
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| **9** | **Do you need accommodation at the workshop location?** |
|  | |
| Participants from other cities may apply for accommodation for maximum 3 nights, starting on the day before  the workshop. Please, name the dates for which you need accommodation. Rooms will be shared with  other participants. | |
| **10** | **Use this space for additional comments** |
|  | |
|  | |

**Thank you very much for your application! We will get back to you soon!**

**E-mail for applications:** [**hiddenmemories2017@gmail.com**](mailto:hiddenmemories2017@gmail.com)